

sician's perusal. Do you see the lovely gold brick? Some woman sees this advertisement; she is a bit skeptical; she asks the druggist, "Do physicians prescribe this?"; the druggist says that some do; she then concludes that she will save her doctor's fee and give "bovine" to the ailing child at home, with the result that some serious condition, maybe, goes on unrecognized and untreated till all chance of recovery is lost. And yet scores of supposedly decent medical journals are advertising this very same stuff—bovine—whatever it may be or contain—and among them are: *American Medicine*; *Medical Record*; the official journals of the state medical societies of *Wisconsin* and *Maryland*, and possibly others; *Cleveland Medical Journal*; *St. Paul Medical Journal*, "Edited and published by the Ramsey County Medical Society." Is it not astonishing that the medical profession will continue to extend with one hand and accept with the other "gold bricks" like this? To bunco one's own self! It seems almost too ridiculous to be true!

Four more state medical organizations have started medical journals as the medium of publication of their transactions, and one,

STATE JOURNALS.

Maryland, has made an existing journal its official publication. Texas, Ohio, South Carolina and New Mexico are the states to begin the publication of new journals, and we certainly wish them the very best of success and long and useful lives. The acceptance of the journal idea by comparatively small organizations, such as South Carolina and New Mexico, is very suggestive, and is a lesson to some of the larger organizations which as yet are undecided. The fact that the members of a society can in this manner be reached every month in the year, and not merely once a year, at the annual meetings, is undoubtedly one of the strongest arguments in favor of the state organization journal. The action of the A. M. A. in establishing the Council on Pharmacy and Chemistry furnishes a good and safe guide for the benefit of those who have charge of the business management of state medical association journals, and there seems little reason to doubt that they can come together on a common ground and effect an organization of state medical journals that will be of great usefulness and advantage to all. The four new journals have started right, and there is no reason why, under the advice of the Council, they should not continue right; we believe that they will, and we certainly wish them well.

THE LANE LECTURES.

The institution of annual courses of lectures to be given by men who have shown themselves to be masters in their particular branch of medicine is one to be commended, for a variety of reasons. No one of experience will deny that the spoken word will produce effects which the written word will not pro-

duce. We may read the words of a man for years and profit greatly by them, and yet be in the dark concerning much of their meaning. Books, especially text-books, are seldom italicized, and the lecture italicizes the work in terms of the personality of the lecturer. This is not only of value in separating the important from the unimportant, a thing that young students especially are often unable to satisfactorily do, it also serves to bring before us the personality of the lecturer, to communicate, to some at any rate, a share of his enthusiasm, and to illuminate by verbal interpolations or case experiences what would perhaps be passages doubtful in interpretation. One thing is certain in connection with this particular course of lectures, and that is that those of us who read in future the writings of Sir Patrick Manson will do so with greatly added enthusiasm, and doubtless with greatly added insight.

If any one thing in Dr. Manson's general plan of considering his subject was apparent from the first, it was the breadth of his point of view. The lectures were no narrow recital of bare facts and naked truths, but were decently clothed in an atmosphere in which the prominent constituents were broad knowledge of biologic principles, wide experience, and that logical imaginativeness so necessary to the scientific investigator. This was nowhere more apparent than in his opening lecture in which, with great simplicity and directness, he formulated the principles underlying the distribution of disease in the tropics. Comparing the distribution of the ordinary flora and fauna with that of the microscopic flora and fauna, he showed that the former must vary because of the differences in climate, whilst the latter shows much less variation because man, with his relatively unvarying characteristics in different parts of the world, is their normal habitat. The variation in diseases in different climates is, therefore, in the main dependent on conditions affecting the disease parasites during the intermediate stage in which they are passing or being carried from one human host to another. This idea, one of the most important advanced, was illustrated in a general way, and by the citation of specific diseases. It was shown, for example, that certain diseases could occur only in the tropics because the necessary temperature and moisture could not be found elsewhere. *Tinea imbricata* and *Pinta* were cited as examples, these being diseases of the skin in which the parasite is directly in contact with the surrounding air, and dependent on a proper condition of this for life. Again it was shown that many tropical diseases could be introduced into temperate climates, but could not spread, usually because the conditions necessary for certain phases in the life history of

their parasites outside the human body were not present. For example, the parasite might have to undergo development in soil at a certain temperature before it could become infective, and, if these temperature conditions were lacking, would naturally die out. Or, on the other hand, the parasite might need to develop in certain tropical animals before it could become infective, and in the absence of these animals would be non-transmissible. Again, certain insects might be needed to remove the parasite from the body, serve as its pabulum for development, and later transmit it to man again. These and other points were abundantly illustrated by concrete examples of disease illustrated by excellent photomicrographs.

Regarding specific diseases, so much of value was brought forward that it will be possible merely to touch on certain points of major importance. Uncinariasis was clearly discussed, and its pernicious effects on an infected territory graphically described. The danger of its spread in this country was called attention to, a danger which we in California cannot blink at, as we have had more imported cases than any other state, judging from the literature. Dr. Manson's advice to examine the feces in every case of obscure anemia resisting ordinary treatment cannot be too strongly or too often reiterated. Parasitic hemoptysis due to infection with the lung fluke was described in one of the early lectures, and here again it was shown that this disease is likely to appear in the United States, the parasite having already been found in the lower animals. In California, with our large Chinese and Japanese population, we may expect to see the disease at an early date, as the local conditions for its spread are probably more favorable than anywhere else in the United States. The importance of the Schistosomum group of parasites, the cause of Bilharziasis, to this state is also to be considered. The rectal form of this disease has already been described in Porto Ricans in this city, and as these people are not particularly cleanly in their habits, and the conditions for transmission may be present here, the local profession should be sharply on the lookout. Filariasis is also very common in Porto Ricans, and has been seen here, and as the Culex mosquito is a widely distributed one, it would seem that the danger from this disease is far from being an imaginary one. The consideration of malaria (and Sir Patrick evidently found out that we had malaria in California) was practical and clear. The most important diagnostic points were stated to be, the periodicity of the attack, the blood examination, and the therapeutic test. We were glad to hear Dr. Manson reiterate what Osler preached for years to Eastern physicians, that if a fever did not respond to

quinine it was not malaria. As Sir Patrick put it, if the fever failed to respond, the trouble was not with the drug or the patient, but with the diagnosis. The remarks on the diagnosis of abscess of the liver, which the lecturer prefaced by an apology for invading the field of surgery, were practical in the extreme, and well worthy of attention, coming as they do from one with such vast experience. They well emphasized the necessity for careful diagnosis, and consistent faith in the diagnosis when once carefully made. No one, unless convinced of the correctness of his diagnosis, would feel like persisting in the pincushioning of the liver advocated by the lecturer.

The general impression of all who attended these lectures was favorable in the extreme. We came away from them with the feeling that we had learned something. We felt that the subject was being handled by a master, and we were willingly hypnotized by the charm of Sir Patrick Manson's personality, and his slight but delightful brogue. We hope that in future years, as in the past, the Lane Lectures may continue to be a source of instruction and of inspiration to the physicians of the Pacific Coast.

Very Important Changes.

The following table gives some of the more important changes in the strength of pharmacopoeial preparations. Those in the second column are in force and effect on and after the first day of September of this year. It is to be particularly noted that the strength of tincture of aconite is less than one-third the old strength, tincture of belladonna is less than two-thirds the old strength, whereas the tinctures of cantharides and of capsicum are double the former strength; tincture of digitalis is only two-thirds, and tincture of veratrum is but one-quarter its former strength.

English Title.	Pharm. 1890. Per Cent.	Present Strength. Per Cent.
Solution of Ferric Chloride.....	37.8	29
" " Sulphate.....	28.7	36
" " Iron and Ammonium Acetate.....	2	2
Opium, granulated.....	13-15	12-12.5
" " powdered.....	13-15	12-12.5
Syrup of Ferrous Iodide.....	10	5
Tincture of Aconite.....	35	10
" " Belladonna Leaves.....	15	10
" " Cantharides.....	5	10
" " Capsicum.....	5	10
" " Colchicum Seed.....	15	10
" " Digitalis.....	15	10
" " Gelsemium.....	15	10
" " Hyoscyamus.....	15	10
" " Indian Cannabis.....	15	10
" " Lobelia.....	20	10
" " Nux Vomica.....total alkaloids	0.3	strychnine 0.1
" " Opium.....	1.3-1.5	1.20-1.25
" " " deodorized.....	1.3-1.5	1.20-1.25
" " Physostigma.....	15	10
" " Rhubarb.....	10	20
" " Sanguinaria.....	15	10
" " Squill.....	15	10
" " Stramonium.....	15	10
" " Strophanthus.....	5	10
" " Veratrum.....	40	10

Reception to Dr. Musser.

Mr. H. H. Bancroft gave a very delightful smoker to Dr. John H. Musser, of Philadelphia, at the St. Dunstan's, on the evening of Saturday, August 19th. It was largely attended by San Francisco physicians, and the royal hospitality of Mr. Bancroft was highly appreciated.